# REFERENCE MATERIAL

# COMPREHENSIVE EVALUATION TOOLS

# **FOR**

# RESIDENTIAL CARE FACILITIES FOR THE ELDERLY

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# RESIDENTIAL CARE FACILITIES FOR THE ELDERLY COMPREHENSIVE VISIT PROTOCOL

#### 8-1000 GENERAL STATEMENT

8-1000

A comprehensive evaluation of each Residential Care Facility for the Elderly must be made annually to determine whether it is in substantial compliance with all statutes and regulations. The procedures to be followed when reviewing the facility file, and conducting and concluding the visit to the facility are discussed in the following sections.

#### PLANNING THE VISIT

This section covers the in-office facility file review, documentation of the review, planning how the visit to the facility will be conducted and gathering information to take into the field for reference.

#### **CONDUCTING THE VISIT**

This section lays out the steps for an onsite assessment of the facility's overall operation and provides detailed information for in-depth review of critical areas such as the assessment of resident and staff records, and medication handling. It provides two different protocols for the visit. Which protocol to use will depend on the facility's compliance record and findings from the overall onsite assessment.

# **CONCLUDING THE VISIT**

This section details how to conduct an exit interview, and discuss violations, citations and plans of correction with the facility representative. It also covers the decision process for determining if additional follow-up with the facility is necessary.

#### 8-1010 PLANNING THE VISIT

8-1010

# **Planning**

There is a lot of work involved in the Planning the Visit stage. An effective compliance visit cannot be made without a thorough knowledge of the program, staffing levels and operating history. There are two protocols for conducting the actual visit to a facility. Which protocol to use is dependent, in part, on the compliance history of the facility. A facility that has experienced compliance problems in specific areas would need a comprehensive visit. This means that an overall assessment of the facility would be conducted and then an in-depth review of six operational modules would be made each year (Modules are discussed, in detail, in the Conducting the Visit section). For any facility that has not experienced compliance problems, the review of the facility file would indicate that it may be a candidate for a *modified* comprehensive annual visit. This means that an overall assessment of the facility will be conducted, and if no significant problems are found, only two operational modules will be reviewed.

8-1010

The Facility File Review is the main component for determining which visit protocol to conduct. Listed below are the criteria for evaluating if a facility's compliance history warrants a modified comprehensive annual visit. NOTE: The first annual visit to a facility must always be a comprehensive visit.

#### **Facility File Review**

The Facility File Review Worksheet (available on Community Care Licensing Division's Intranet Common Library) will help guide the Licensing Program Analyst through the decision making process for which type of visit to conduct. It is also to document information found in the file. The Facility File Review Worksheet will become a permanent part of the facility file (placed in the front section of the file) so that documents will not need to be re-reviewed year to year. At the Local Unit Manager's discretion, a new Licensing Program Analyst should review the file with the Local Unit Manager or an experienced Licensing Program Analyst. To ensure that the file contains complete and current documents and to ensure the appropriate visit protocol is followed, the following should occur:

The documents listed below were approved during the application/licensure process. Ensure that any subsequent revisions have been reviewed and that the date of approval was/is entered.

- 1. Administrative Organization (LIC 309)
- 2. Articles of Incorporation
- 3. Partnership Agreement
- 4. Control of Property
- 5. Plan of Operation
- 6. Admission Policies and Procedures
- 7. Admission Agreement
- 8. Private Water Supply/Bacterial Analysis
- 9. Medication Procedures
- 10. Fire Clearance
- 11. Job Descriptions/Inservice Training

8-1010

- 12. Theft and Loss Policy/Procedures
- 13. Affidavit Regarding Resident Resources/Surety Bond (LIC 400)

#### The following must be reviewed annually:

- 1. The facility license ( to ensure the information is current )
- License fee acknowledgement
- 3. Personnel Report (LIC 500). Note the names and job descriptions of staff. The staff hours should reflect adequate 24-hour coverage.
- 4. That required criminal record clearances have been received.
- 5. That exemptions are still valid and in effect.
- 6. Any facility exclusions.
- 7. That any exceptions are still valid and facility is still meeting the criteria.
- 8. Any waivers.
- 9. Whether any civil penalties have been assessed?
- 10. Complaints and associated documents (LIC 802, 9099,809).
- 11. Incident reports. While the Licensing Program Analyst is expected to review incident reports on a flow basis, it is not expected that he/she remember all incidents that occur in a facility. The Licensing Program Analyst should look for patterns, such as the involvement of a particular staff member or trends in the types of incidents reported.
- 12. Technical Support Program involvement.
- 13. The facility probation terms, compliance plan, or pending administrative action.
- 14. Whether there have been any deficiencies in the past 12 months involving:
  - Health Related Conditions or Observation of Resident
  - Medically Related Issues
  - Personal Rights

8-1010

- Fire Clearance
- 15. Whether in the last twelve months there has been a single deficiency, but no history of ongoing problems with:
  - Fire clearance
  - Fingerprints
  - Care and supervision
- 16. All Licensing Reports (LIC 809s)
- 17. Whether the compliance history indicates that a modified comprehensive visit is warranted.

# A comprehensive annual visit <u>must</u> be completed if the facility:

- Has a pending administrative action against the license.
- Is currently on probation.
- Currently has a compliance plan.

# Has been cited in the past twelve (12) months for:

- Resident incidental medical service/needs of the residents.
- Observation of residents
- Personal Rights

# A comprehensive annual visit <u>may</u> be required if there have been deficiencies in:

- Care and Supervision
- Fire Clearance
- Fingerprint Clearance

The Licensing Program Analyst should exercise judgement as to whether the deficiency was for a single incident or whether the facility has a history of noncompliance.

8-1010

The **Facility File Review Worksheet** is intended for in-office use only and a copy is not to be provided to the facility. Any requests to the licensee for additional information must be documented in the facility file. The Licensing Program Analyst can document the request using the Facility Evaluation Report (LIC 809), a Contact Sheet (LIC 185), or the Detailed Supportive Information (LIC 812).

Licensing Information System (LIS) and Field Automation System (FAS)

Additional important information regarding the facility is available in the LIS and FAS.

- Review a current Facility Profile (LIS 055) for accuracy and make changes as appropriate. Note any information in the "Comments" section such as special conditions and verify that the correct client population is identified.
- Obtain a current Facility Personnel Summary Report (LIC 531) from the LIS and compare names to the Personnel Report (LIC 500). Check for criminal record clearances for staff or volunteers subject to these requirements.

#### 8-1020 PREPARING THE ANNUAL VISIT PACKAGE

8-1020

This package will make the annual visit as effective as possible. It reminds the Licensing Program Analyst of items to check or questions to ask, based on the information obtained during the planning phase. Some components listed may be accessible through the Field Automation System (FAS) or the laptop at the time of the visit and a hard copy will not be necessary. Keep in mind the importance of safeguarding all confidential documents. The following items should be available for reference at the time of the visit:

- 1. Facility Floor Plan (LIC 999)
- 2. Emergency Disaster Plan (LIC 610)
- 3. Qualifications of Administrator
- 4. Inservice Training/Verification
- 5. Copies of previous Licensing Reports (LIC 809, 9099). Only include the last 2 years for facilities licensed for a longer period.
- 6. Personnel information including notes or copies of the current Personnel Report (LIC 500) and Designation of Administrative Responsibility (LIC 308)
- 7. Information on waivers and exceptions
- 8. Facility Personnel Summary Report (LIC 501)

# 8-1020 PREPARING THE ANNUAL VISIT PACKAGE (Continued)

8-1020

In addition to the above, the following forms must be available when making the visit (some of the forms listed are accessible through the laptop computer and carrying a hard copy will not be necessary).

- 1. Facility Evaluation Report (LIC 809)
- 2. Detail Supportive Information (LIC 812)
- 3. Advisory Notes (LIC 9102)
- 4. Client/Resident Records Review (LIC 858)
- 5. Review of Staff/Volunteer Records (LIC 859)
- 6. Facility Civil Penalty Assessment (LIC 421)
- 7. Client Request: Health-Condition Relocation Review (LIC 9105)

An Affidavit Regarding Client/Resident Cash Resources (LIC 400), Facility Personnel Summary Report (LIC 500) and Designation of Administrative Responsibility (LIC 308) should also be taken to obtain updates if current documents are not on file. A Forms Request (LIC 183A) and a Proof of Correction (LIC 9098) should also be a part of the packet and offered when indicated.

#### 8-1030 CONDUCTING THE VISIT

8-1030

The annual visit is an overall assessment of the facility. The Licensing Program Analyst is responsible for evaluating compliance with all licensing laws and regulations, including areas where <u>prior</u> deficiencies were noted. The visit is to be documented on the LIC 809.

Citations should be issued according to the protocols outlined in Evaluator Manual Sections 3-3000 et seq. and 3-4200 et seq. When deficiencies are cited, the Licensing Program Analyst must be able to justify his/her findings. Any course of action must be discussed with the staff designated with administrative responsibility and/or the licensee to ensure an understanding of the required action(s).

The Licensing Program Analyst should begin the visit by conducting a facility assessment. This is done by walking through the facility to observe and talk with residents and staff, and to inspect for compliance with safety, maintenance and operational requirements.

8-1030

Special attention should be given to the following:

# 1. Observation of Residents:

- What is the ambulatory status of residents?
- Incidental medical needs
- Are dressing/grooming requirements being met?
- Are restraints being used or present in the facility?
- Is the facility operating within the capacity and limitations of the license?

# 2. Food service:

Are there sufficient supplies?

Is food properly stored?

Are the food areas, dishes and utensils clean?

Are there any indications of the presence of pests?

# 3. Physical Plant/Safety Issues

Is the water temperature within the required limits?

Is a signal system required? If so, is it operational?

Is the facility clean and in good repair?

Are grab bars, non-skid mats or strips maintained for each bathtub and shower?

Are toxics properly stored?

8-1030

#### 4. Medications

Are centrally stored medications locked?

Are medications being given as prescribed. Select a sample of medications and records to review.

#### 5. Records

Are there any new residents or staff since the last visit? If so, review those records. If you are visiting a facility (with a capacity of 16 or more), you must review all new resident and staff records up to a total of ten. If the facility has more than a combined total of ten new resident and/or staff select a sample of ten to review, to get an indication of how well records are maintained.

Once the facility assessment has been completed, the Licensing Program Analyst must make a decision about how the rest of the visit will be conducted.

If the information gathered during the facility file review indicates the need for a comprehensive visit, the Licensing Program Analyst completes a review of all six visit modules outlined below.

If the file review indicates that the facility is eligible for a modified comprehensive visit, the Licensing Program Analyst must combine this information with the overall assessment of the facility. For example, if the facility is not in compliance with basic health and safety requirements, has residents whose health related needs are in question, or there are problems in the handling of medications, this will negate the findings of the file review and a comprehensive review of all six visit modules would be required.

If the file review indicates that the facility is in substantial compliance and nothing is found during the overall assessment which affects the facility, the Licensing Program Analyst would choose two visit modules to review. Over a three year period it is expected that all six modules will be reviewed for a facility that qualifies for modified visits.

# **VISIT MODULES**

#### A. PERSONAL ACCOMMODATIONS

Regulation sections 87204, 87311, 87307, 87203, 87308, 87303, 87309 should be used to complete this module. The following can be used as a guide, but does not include all of the regulatory requirements.

8-1030

# Verify that:

- 1. There are common areas of sufficient space to promote and facilitate the program of activities.
- 2. There are only two residents in each bedroom and each bedroom contains all the necessary furniture, closets, and drawer space.
- 3. There are equipment and supplies necessary for personal care and maintenance of adequate hygiene available for each resident.
- 4. Individual privacy is provided.
- 5. All residents are protected against hazards.
- 6. There is clear access to all exits in case of fire, or an emergency.
- 7. The facility is operating within the limits of the license.
- 8. There is telephone service available to the residents.
- 9. There is no new construction or alterations to the facility that may pose a hazard to the health and safety of the residents.
- 10. If the facility has a capacity of 16 or more, separate administrative offices or areas are maintained.
- 11. In general, the facility is clean, safe, sanitary and in good repair.
- 12. The temperature in the facility is appropriate for the residents for the time of year.
- 13. Disinfectants, cleaning solutions, poisons, firearms and any other items which could pose a danger if readily available to residents are inaccessible to residents.

#### B. FOOD SERVICE

<u>Regulation section</u> 87555 should be used to complete this module. The following can be used as a guide, but <u>does not</u> include all of the regulatory requirements.

8-1030

# Verify that:

- 1. The facility has sufficient food to meet the needs of the residents and all food is of good quality.
- 2. Any modified diets prescribed by a resident's physician are being provided.
- 3. Procedures which protect the safety, acceptability and nutritive values of food are being observed in food storage, preparation, and service.
- 4. Freezers of adequate size are maintained at a temperature of 0 degrees F (- 17.7 degrees C), and refrigerators of adequate size are maintained at a maximum temperature of 40 degrees F (4 degrees C). They shall be kept clean and food shall be stored to enable adequate air circulation to maintain the above temperatures.
- 5. Pesticides and other toxic substances are not stored in food storerooms, kitchen areas, or where kitchen equipment or utensils are stored.
- 6. All kitchen areas are clean and free of litter, rodents, vermin and insects.
- 7. The facility has a supply of nonperishable foods for a minimum of one week and perishable foods for a minimum of two days on the premises.
- 8. All utensils used for eating and drinking and in preparation of food and drink are being cleaned and sanitized after each usage. Verify that dishes and utensils are being disinfected.

#### C. MEDICALLY RELATED SERVICES

Regulation Sections 87465, 87605, 87615, 87612, 87638, 87609, 87611, 87618, 87619, 87621, 87622, 87623, 87625, 87626, 87628, 87629, 87631, 87633, 87639, 87616, 87617, 87705, should be used to complete this module. The following can be used as a guide, but does not include all of the regulatory requirements.

#### Verify that:

1. The licensee arranges, or assists in arranging, medical and dental care appropriate to the conditions and needs of residents.

8-1030

- 2. The licensee provides assistance in meeting necessary medical and dental needs. This includes transportation which may be limited to the nearest available medical or dental facility which will meet the resident's need. In providing transportation, the licensee shall do so directly or make arrangements for this service.
- 3. The licensee assists residents with self-administered medications, as needed.
- 4. If the resident's physician has stated in writing that the resident is unable to determine his/her own need for nonprescription PRN medication but can communicate his/her symptoms clearly, facility staff designated by the licensee are permitted to assist the resident with self-administration, provided all requirements are met.
- 5. For every prescription and nonprescription PRN medication for which the licensee provides assistance there is a signed, dated written order from a physician, on a prescription blank, maintained in the resident's file, and a label on the medications. Both the physician's order and the label shall contain all of the required information.
- 6. Persons with "prohibited health conditions" are not admitted or retained, except as outlined in the regulations.
- 7. If residents have health conditions which cannot be cared for within the limits of the license the Department has ordered the licensee to relocate the resident (health condition relocation order).
- 8. A resident, or the resident's responsible person, if any, is permitted to request a review and determination of the Department's health condition relocation order by the interdisciplinary team.
- 9. If the licensee retains terminally ill residents who receive hospice services from a hospice agency in the facility, all required conditions are met.
- 10. If the licensee retains residents with dementia in the facility all required conditions are met.

#### D. RESIDENT ASSESSMENT AND SERVICES

Regulation Sections 87456, 87507, 87458, 87506, 87468, 87469, 87608, 87455, 87457, 87459, 87461, 87462, 87463, 87505, 87466 should be used for completing this module. The following can be used as a guide, but does not include all of the regulatory requirements.

8-1030

# Verify that:

- 1. Prior to accepting a resident for care the facility has evaluated his/her suitability by: completing a pre-admission appraisal, obtaining a medical assessment signed by a physician within the last year, determining the amount of supervision necessary, determining the amount of personal assistance and care needed, obtaining sufficient information about the person's likes and dislikes to determine if the living arrangements and activities in the facility will be satisfactory.
- 2. The licensee has completed an individual written admission agreement with each resident and that resident's responsible person, if any.
- 3. A separate record is maintained for each resident. Each record should be current and complete and be maintained in the facility or in a central administrative location readily available to facility staff and to Department staff.
- 4. Each record contains all required documents and information.
- 5. Acceptance or retention of residents by the facility is in accordance with the criteria specified in the regulations.
- 6. The pre-admission appraisal has been updated, in writing, as frequently as necessary to note significant changes and to keep the appraisal accurate. The reappraisals must document changes in the resident's physical, medical, mental, and social condition.
- 7. The licensee regularly observes each resident for changes in physical, mental, emotional and social functioning. The licensee has provided appropriate assistance when such observation revealed unmet needs which might require a change in the existing level of service, or possible discharge or transfer to another type of facility.
- 8. Persons with prohibited health conditions have not been admitted or retained in a residential care facility for the elderly, except as specified in regulation.
- 9. Any necessary exceptions have been requested and approved.
- 10. Upon admission each resident and the resident's responsible person have been personally advised of and given a list of the resident's personal rights. A copy signed by the resident and the resident's responsible person must be included in the resident's record.

8-1030

**NOTE:** A sampling of the facility's residents must be interviewed by the Licensing Program Analyst while at the facility. Discussion topics should include:

Food Service Personal Rights Activities Locks/Restraints

#### E. STAFFING

Regulation Sections 87355, 87356, 87563, 87405, 87406, 87407, 87411, 87412, 87413, 87415, should be used to complete this module. The following may be used as a guide, but does not include all of the regulatory requirements.

# Verify that:

- 1. Employment application forms have been completed and maintained for each employee and available for review.
- 2. All persons covered in Section 1569.17(b) of the Health and Safety Code have had a criminal record review and a criminal record clearance or exemption. Such persons include, but may not be limited to: adults responsible for administration or direct supervision of staff, any adult other than a client residing in the facility, any person who provides client care, any staff person or employee who has contact with the clients, and any volunteer (unless otherwise exempted).
- 3. All personnel, including the licensee and administrator, are in good health, and physically and mentally capable of performing assigned tasks. Good physical health shall be verified by a health screening.
- 4. The facility has a certified administrator.
- 5. Facility personnel are sufficient in numbers, and competent to provide the services necessary to meet resident needs.
- 6. All personnel are being given on the job training or have related experience in the jobs assigned to them. The training and/or experience must be appropriate as evidenced by a safe and effective job performance. According to their job assignment, staff should have knowledge of and skill in: a) Principles of good nutrition, good food preparation and storage and menu planning, b) housekeeping and sanitation principles, c) resident care and supervision, d) how to safely assist with prescribed medications, e) how to recognize early signs of illness and the need for professional help, f) community services and resources.

8-1030

**NOTE:** A sampling of facility personnel must be interviewed by the Licensing Program Analyst while at the facility. Discussion questions should address:

- Familiarity with the needs of the residents
- Specific staff responsibilities
- Familiarity with medication procedures
- Familiarity with the facility Plan of Operation
- Knowledge of resident's rights
- Knowledge of reporting requirements

#### F. PLAN OF OPERATION

Regulation Sections 87206, 87207, 87755, 87208, 87212, 87216, 87217, 87223, 87211, 87213, 87508, 87468, 87312, 87219, 87224, should be used to complete this module. The following can be used as a guide, but does not contain all of the regulatory requirements.

# Verify that:

- 1. Transportation arrangements have been made for residents who do not have independent arrangements.
- 2. A disaster and mass casualty plan is available, in writing.
- 3. Facility staff understand that each resident is to be free from corporal or unusual punishment, humiliation, mental abuse, or other actions of a punitive nature, such as withholding of monetary allowances or interfering with daily living functions such as eating or sleeping patterns or elimination.
- 4. Each resident may leave or depart the facility at any time and is not to be locked in any room, building, or on facility premises by day or night. This does not prohibit the establishment of house rules, such as the locking of doors at night, for the protection of residents; nor does it prohibit, with the permission of the licensing agency, the barring of windows against intruders.
- 5. The facility has all necessary waivers and is able to fulfill requirements for all waivers, including dementia and hospice.

8-1030

- 6. The facility encourages residents to maintain and develop their fullest potential for independent living by making available a planned activities program.
- 7. The facility has everything in place to fulfill commitments portrayed in its program statement.

Services provided by the facility are conducted so as to continue and promote, to the extent possible, independence and self-direction for all persons accepted for care.

#### 8-1040 PHYSICAL PLANT REVIEW

8-1040

The facility visit includes a walk-through to inspect the buildings, grounds and overall maintenance and operation. The Licensing Program Analyst shall conduct a complete review for compliance with all the applicable regulation sections. Facility staff should open unlocked doors to rooms that are designated for non-resident use. This will give the Licensing Program Analyst an opportunity to view the room. If the facility cares for individuals with dementia, the Licensing Program Analyst should ensure that all hazardous items are locked within staff room(s) (if applicable) or that the room(s) remain locked at all times. If the Licensing Program Analyst has no specific reason(s) for concern and does not observe any obvious resident health and safety issues, facility staff's privacy should be respected.

The following can be used as guidelines, but do not include all of the regulatory review requirements.

- <u>Telephones</u> Verify that there is a working telephone on the facility premises. If applicable, also review the facility's policy on telephone usage.
- <u>Transportation</u> Verify the vehicle is in good operating condition (if applicable). Verification may consist of interviewing staff, observing maintenance records and/or physical observation such as checking for operational seat belts.
- <u>Health-Related Services</u> Verify adequacy of first aid supplies; verify storage of medication (if centrally stored), i.e., refrigeration, locked.

# 8-1040 PHYSICAL PLANT REVIEW (Continued)

8-1040

- <u>Food Services</u> Review for adequate supplies of perishable and non-perishable foods; sanitary condition of food preparation areas; provisions for modified diets; cleanliness and adequacy of dishes and utensils; condition of appliances; and separation of storage of cleaning supplies and food supplies.
- <u>Buildings and Grounds</u> Review for building changes/alterations; residents who
  are non-ambulatory reside in designated rooms; sufficient lighting is provided;
  operating signal systems (if required); all areas are free from potential hazards;
  exits are not obstructed; residents can operate front door locks and are not locked
  in any room; proper storage of poisons, toxic substances, other dangerous objects
  and firearms.
- <u>Fixtures, Furniture, Equipment and Supplies</u> Review fixtures, e.g. toilets, sinks, showers/baths; solid waste disposal; adequacy of linens; review furniture for cleanliness and adequacy; availability of basic hygiene items; determine that faucets deliver water and the temperature of the hot water. If applicable, review for a current bacteriological analysis on <u>private</u> water source to establish the safety of the water.
- <u>Dementia Requirements</u> When a facility cares for person(s) with dementia, the following areas should be noted during the walk through:
  - a. Pools and other bodies of water are fenced.
  - b. Yards are completely fenced, with self-closing latches and gates.
  - c. Exterior doors are equipped with operational bells/buzzers.

# 8-1040 PHYSICAL PLANT REVIEW (Continued)

8-1040

- d. Inaccessibility of ranges, heaters, wood stoves/other heating devices, knives, matches, firearms, tools and other items that could constitute a danger.
- e. Furniture and equipment is safe and free from potential hazards.
- f. Medications, cleaning supplies and other toxic substances are stored inaccessible.
- g. Verify that delayed egress (if so equipped) is not used as a substitute for sufficient numbers of staff.
- h. Residents with dementia are provided interior and exterior spaces to wander freely when locked exterior doors have been approved. Are residents' personal rights being violated?
- i. Does the facility have enough staff to provide supervision for residents with dementia and still meet the needs of other residents?

#### 8-1050 RESIDENT INTERVIEWS

8-1050

Residents should be interviewed briefly at the time of the facility visit and in a manner that is least disruptive. Evaluator Manual Section 3-2000 includes procedures for conducting interviews. Regulations require the licensee to allow private interviews; however, the Licensing Program Analyst or the resident may request the presence of a third person. The licensee's permission is not required to interview a resident; however, if the resident objects to the interview, the Licensing Program Analyst shall honor this objection. To ensure confidentiality, the interview should occur away from facility staff and other residents. The interview offers the Licensing Program Analyst the opportunity to observe and evaluate the physical appearance of the resident. Issues that may be discussed include:

- Meals
- Personal rights
- Theft and Loss Prevention Program
- Fire drills
- Activities
- Locked doors

# **8-1050 RESIDENT INTERVIEWS** (Continued)

8-1050

- Responsiveness of staff to residents' needs
- Physician visits

#### 8-1060 STAFF INTERVIEWS

8-1060

The residential care facilities for the elderly comprehensive visits require interviewing a sampling of facility personnel. The Licensing Program Analyst may interview additional staff by telephone. The purpose of the interview is to determine how knowledgeable staff is about the facility's policies, procedures and operations. Discussion questions may address the following:

- Familiarity with the needs of the residents.
- How information is disseminated to staff about the residents.
- Specific staff responsibilities.
- Familiarity with medication procedures.
- Familiarity with emergency procedures.
- Knowledge of residents' rights.
- Familiarity with the facility's Theft and Loss Prevention Program.
- Knowledge of reporting requirements.

#### 8-1070 FACILITY RECORD REVIEW

8-1070

Review the facility's files to verify the following documentation is complete, current and posted when required:

- Facility license
- Licensing reports from the previous 12 months
- Activity plan
- Disaster and Mass Casualty Plan
- Menus (actual or sample on file as required)
- Register of Residents

# **8-1070 FACILITY RECORD REVIEW** (Continued)

8-1070

- Theft and Loss Policy
  - a. Does the facility have a Theft and Loss Policy as required in statute?
  - b. Are facility staff trained on the policy?
  - c. Are lost and stolen items documented?
  - d. What is the facility's investigation procedure?
  - e. Does the facility notify all current residents and all new residents, upon admission, of the facility's policy and procedure relating to the Theft and Loss Prevention Program?
- Waivers
- If the facility cares for residents with dementia, is there an approved written plan of operation addressing the needs of those residents with dementia?
- Current admissions agreement
- Written statement that informs the resident and the resident's responsible person
  that a copy of the inspection reports are available at the Regional Office for
  review.
- Does the actual medication on hand accurately compare with the centrally stored medication records? The Licensing Program Analyst may recommend a "start date" for medications entered into the record.

At this time, the Licensing Program Analyst should request missing/incomplete documentation noted during the file review.

#### 8-1080 PERSONNEL RECORD REVIEW

8-1080

The Licensing Program Analyst must select files for review. Personnel records must be reviewed for completeness and accuracy. The Licensing Program Analyst should use the Review of Staff/Volunteer Records (LIC 859) to document the personnel files reviewed and citing deficiencies when appropriate. Ten personnel records or 10 percent (whichever is greater) shall be reviewed.

Additional files may be reviewed at the Licensing Program Analysts discretion. For example, if the Licensing Program Analyst has not made prior visits to the facility, or if the facility has a history of Type A deficiencies or if civil penalties have previously been assessed.

• The Licensing Program Analyst may use the LIC 500 to select the files for review.

# 8-1080 PERSONNEL RECORD REVIEW (Continued)

8-1080

- Special attention should be given to files of new hires and staff mentioned frequently in incident reports.
- Verify that the individuals listed on the Notice of Facility Roster (LIS 555) are current employees and update the form as appropriate.
- Review files to verify completion of an approved certification program (if applicable) training including Administrator's Certification.
- A dated weekly employee time schedule should be displayed for reference.
- An on the job training program in required areas.
- Review the health screening report to verify that all employees are qualified and do not have health conditions that would create a hazard.
- Does the staff have specific dementia care training (for those facilities that accept and retain residents with dementia)? Are they trained in identifying and reporting abuse and neglect? Are they trained in how medications can affect residents' behaviors?

#### 8-1090 RESIDENT FILE REVIEW

8-1090

The Licensing Program Analyst must select files for review. Ten resident files or a minimum of 10 percent (whichever is greater), shall be reviewed. Additional files may be reviewed at the Licensing Program Analyst's discretion. Existing regulations require the facility to provide a current Register of Facility Residents-Residential Care Facilities for the Elderly (LIC 9020A), or comparable form. The Licensing Program Analyst may randomly select the files from this list, or may select files for review using the following criteria:

- Resident is mentioned in incident report(s).
- Resident's file was not reviewed at the time of the previous annual visit.
- Facility has obtained or is requesting an exception for a resident.
- Resident has one or more restricted health conditions.

# **8-1090 RESIDENT FILE REVIEW** (Continued)

8-1090

- <u>Hospice Requirements</u>- If the facility has a resident receiving hospice services, the following documents should be reviewed to ensure that the specific requirements are met.
  - a. Is there a signed request from the resident or their authorized representative to remain in the facility to receive hospice?
  - b. Is there a care plan?
  - c. Is the terminally ill resident (if any) a threat to the health of other residents?
  - d. Are any personal rights being violated?
  - e. Is there a signed statement from the hospice patient's roommate (if any) agreeing to allow hospice staff into shared living space?
  - f. Is there information such as: The name, address, telephone number (including a 24-hour emergency number) of the hospice agency on file?
- <u>Dementia Requirements</u>- If the facility has a resident with dementia, the following documents should be reviewed to ensure that specific requirements are met.
  - a. Is there a record of a yearly assessment of the resident?
- <u>Admission Agreements</u>- The initial agreement, subsequent modifications, as well as the current signed agreement should be retained in the resident's file. Additional items to review include:
  - a. Does the agreement specify the basic rate and conditions for modification?
  - b. Does the facility charge extra for any basic services such as: Personal assistance and care, observation and supervision, planned activities, food service, or arrangements for medical and dental care?
  - c. Does the agreement specify refund conditions?
  - d. Does the agreement include general facility policies?
  - e. Does the agreement explain circumstances which may result in the resident's eviction or termination of the agreement?

# **8-1090 RESIDENT FILE REVIEW** (Continued)

8-1090

f. Is the agreement dated and signed?

Using the Client/Resident Records Review (LIC 858), the files must be checked for completeness and accuracy, citing deficiencies when appropriate.

#### 8-1100 CONCLUDING THE VISIT

8-1100

The Licensing Program Analyst should be able to answer the following questions upon conclusion of the visit:

- What are the major components of the facility's general plan of operation?
- What does the facility do to ensure that staff are appropriately trained?
- What are the lines of communication; how is general facility information and resident specific information relayed, e.g. at shift changes, and staff meetings?
- What is the staff's understanding of their responsibility to report abuse and special incidents?
- How does the facility staff respond to medical and other emergencies?
- How does the facility monitor the conditions/progress of residents' health conditions being treated by a home health agency?
- What are the procedures for prescription medication, including but not limited to:
  - a. How does the staff ensure that each resident's medication is always available in the facility?
  - b. What procedures are in place to prevent mistakes in distribution of medication and to safeguard medications?
  - c. What is the facility's procedure for over the counter, PRN and sample medications?
  - d. What does staff do when a resident refuses to take medication?
  - e. What is the policy and procedure for physician's orders given over the phone, e.g. medication dose alteration or discontinued medication?
  - f. What is the procedure for medications that are taken on outings or weekend visits?

# 8-1100 CONCLUDING THE VISIT (Continued)

8-1100

- How does the facility ensure that residents' personal rights are not violated?
- What is the overall physical condition of the facility and what are the facility's procedures for maintenance?

#### 8-1110 EXIT INTERVIEW

8-1110

The Licensing Program Analyst shall conduct the exit interview as outlined in the Evaluator Manual Section 3-4200. If the facility has a good complaint record, and the past history indicates responsiveness to plans of correction, the LIC 9098 may be used to clear the violations cited.

#### 8-1120 FOLLOW UP

8-1120

Once the visit is concluded, the Licensing Program Analyst should determine the need for intervention and make the following decisions:

- Should the Licensing Program Analyst discuss the facility with the Licensing Program Manager?
- Should the licensee come into the office for a compliance plan, informal or noncompliance conference?
- Should the Licensing Program Analyst provide information to the licensee/administrator regarding the Technical Support Program?
- Should the facility be referred to the Legal Division for possible action against their license?

The Licensing Program Analyst's work related to comprehensive visits does not end upon conclusion of the visit. Plan of correction due dates must be entered into the Control Book. An entry must also be made when deficiencies have been cleared or to indicate assessment of civil penalties.

After the comprehensive evaluation visit is completed, the Licensing Program Analyst shall send copies of the LIC 809 to the placement agency (if applicable).

# The Licensing Program Analyst should contact the following as necessary:

• Community Care Licensing Division Audit Section, e.g. potential trust audit.

# **8-1120 FOLLOW UP** (Continued)

8-1120

- Legal Division, e.g. potential or pending Temporary Suspension Order or revocation.
- Other public agencies, e.g. local planning authority or fire authority.
- Placement Agency (if applicable).

#### 8-1130 POST VISIT/PLAN OF CORRECTION/CASE MANAGEMENT 8-1130

The Licensing Program Analyst shall comply with the plan of correction protocols outlined in Evaluator Manual Section 3-3600 et seq. A copy of the LIC 809 clearing the violations cited during the visit should be sent to the placement agency (if applicable).